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DEC 1 0 2004

Atty Docket No. 18649J-000420US

PTO FAX NO.: 703-872-9306

ATTENTION:

Examiner George M. Konata

Group Art Unit 1616

**2**001/002

## OFFICIAL COMMUNICATION

## FOR THE PERSONAL ATTENTION OF

# **EXAMINER George M. Konata**

#### CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Min Michael He et al., Application No. 10/713,473, filed November 14, 2003 for NOVEL TABLETS INCORPORATING ISOFLAVONE PLANT EXTRACTS AND METHODS OF MANUFACTURING WATER SOLUBLE POLYMER-BASED RAPIDLY DISSOLVING TABLETS AND PRODUCTION PROCESSES THEREOF are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

#### Documents Attached

Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page)

Number of pages being transmitted, including this page: 2

Dated: December 10, 2004

Jose Luna

PLEASE CONFIRM RECEIPT OF THIS PAPER BY RETURN FACSIMILE AT (415) 576-0300

TOWNSEND and TOWNSEND and CREW LLP Two Embarcadero Center, Eighth Floor San Francisco, CA 94111-3834 Telephone: 925-472-5000

Fax: 925-472-8895

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# REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

	·	PTO/88/88 (09-04
Application Number	10/713,473	
Filing Date	November 14, 2003	
First Named Inventor	He, Min Michael	
Art Unit	1616	
Examiner Name	George M. Konata	
Altorney Docket Number	18649J-000420US	

To: Commissioner P.O. Box 1450 Alexandria, VA									
Please withdraw m	e as attorney or agent for the abov	ve identifi	ed pater	nt app	lication	, and			
all the attorne	eys/agents of record								
all the attorne	eys/agents (with registration numb	ers) listed	on the	attacl	hed par	per(s),	, or		
all the attorneys/agents associated with Customer Number									
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.									
The reasons for this request are:Responsibility for the prosecution of this application is being transferred to the Applicant/Assignee.									
CORRESPONDENCE ADDRESS									
1. The correspondence address is NOT affected by this withdrawal. 2. Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:									
OR									
Firm or Individual Name	Andrea Colby, Esq								
Address  Johnson & Johnson Consumer Companies, Inc. One Johnson & Johnson Plaza, Room 4211									
City	New Brunswick	State	NJ				Zip	08933	
Country	USA								
Telephone	(732) 524-2792			Fax (732) 524-5008					
Signature	ar_		-						
Name Loseph R.	ne Joseph R. Snyder			Registration No.			39,381		
Date December	10, 2004			Telephone No.			925-472-5000		
NOTE: Withdrawal is effective will date of a time period for respons	then approved rather than when received. Unlied or possible extension period, the request to v	ess there an	at least 3 amally disa	0 days	between a	approval	of withdraw	al and the expiration	

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